EXHIBIT NN

Grievance and Disciplinary Actions; Lawson PA59.1

☐ Palmetto Health – Corporate
☐ Palmetto Health Baptist – Columbia
☒ Palmetto Health Richland
☐ Palmetto Health Physician Practice

PALMETTO HEALTH
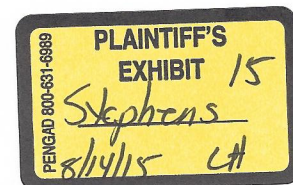
Disciplinary Action Report

INSTRUCTIONS

1. Complete fields 1-11 (page 1) and a detailed explanation of the infraction in field 12 (page 2) electronically and print
2. Obtain proper signatures
3. Send original copy to Human Resources
4. Give one copy of the completed form to the employee
5. Give one copy of the completed form to the supervisor

1. Infraction Date: 12/5-7/11

2. Employee Name: Afraaz Irani, MD   3. Employee #: 103178

4. Department: Orthopaedic Surgery Residency   5. Job Title: Resident

6. Disciplinary Action Date: 12/9/11

7. **Infraction Category:** Violation of Standards of Behavior

8. Supervisor Name & ID# : David Koon, MD

9. Supervisor Job Title: Residency Program Director

10. **Previously counseled on (list dates):** 8/15/11, 9/22/11, 10/3/11, 11/21/11, 12/5/11

11. **Disciplinary Action Outcome:** Suspension

Anecdotal Information:

♦ **The supervisor MUST attach a detailed explanation of the occurrence including reason(s) for the disciplinary action.**

♦ This action gives the employee a chance to correct the deficiencies noted above. If the employee fails to correct them, he/she may be subject to further action up to and including discharge.

** **IMMEDIATE AND SUSTAINED IMPROVEMENT IS REQUIRED.**

Employee Acknowledgment:

♦ This action has been discussed with the employee
♦ The employee's signature does not necessarily indicate agreement
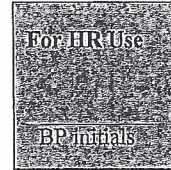♦ The employee has received a copy of this document

_____   _____
Employee Signature   *Date*
I have discussed this action with the employee.

_____   _____
Supervisor's Signature   *Date*

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I have reviewed this action.

_____   _____
Reviewer's Signature   Date

12. In the space below, please provide a detailed explanation of the infraction including reason(s) for the disciplinary actions taken. (Staple this document to page 1 when completed)

Ongoing issues related to patient care and professionalism were initially recognized in the fall of 2010. First verbal counseling by residency director occurred in December of 2010. Additional faculty and chief resident counseling had to be done after the December counseling, with formal academic remediation starting August 15, 2011.

Level III academic remediation/suspension was recommended by the faculty after they met with Dr. Irani on December 5, 2011; suspension was initiated on December 9, 2011. Unanimous GMEC approval followed on December 12, 2011.

In the December 5, 2011 meeting with faculty, Dr. Irani repeatedly refused to give direct answers to several questions for his actions in several patient care examples. Dr. Irani seems to have no understanding of the problems and accepts no personal responsibility for either the problems or the ways in which to address them.

Suspension infractions included:

*Dr. Irani would not admit agreement to any of the initial remediation issues which led to his placement on Level II academic remediation.

*Dr. Irani has displayed evidence of ongoing inadequate patient care. He has prescribed inappropriate doses of narcotics, failed to evaluate post-operative patients with wound care issues, and failed to abide by direct attending instructions during the care of clinic patients.

*Dr. Irani has continued to display a lack of teamwork within the residency framework. He has repeatedly shown up late for morning rounds, been ineffective in preparing the morning "list", and has been delinquent in assigned tasks.

*Dr. Irani displayed inappropriate patient care in the case of Trauma, F375. He displayed a lack of empathy and compassion, poor interpersonal communication, and a lack of appropriate teamwork with ancillary staff. These actions led to the patient requesting to be transferred to another hospital.